## Hollister Recreation

## **Community Center Facility Rental Form**

## REQUESTED DAY OF USE

Day of the Week	Date	OXI MACHINES			
Requested Room(s) - Check the Appropriat					
☐ San Benito Room with Kitch					
☐ San Benito Room only					
(whiting) Kitchen Only					
☐ Gabilan Room	MATOMORE				
☐ Calaveras Room		TYPE OF FUNCTION	FUBBLEY		
CONTACT PERSON					HIL
Name:	r outside buroung. Id teiturded to desi	Type:	a sammer b	All trasti Clean an	
Address:	Periniee	Setup time:			
City:ears being is by the property of bemales		THE LOCAL HOLD DRICKING COLUMN TRACE, AND			
Home Number:		Cleanup time:			
Work Number:		Total # of hours in use:_			
Cell Number:	Prince of the control of the control	Number of Guests:			
CLUB/ORGANIZATION INFORM		Number of Adults:	794 Morathuaz	W. mest D	
Name:		Number of Youths:	illag 9 by	an apaló	C
Address:		Will food be served?	Yes □	No 🗆	4.2
City:		Will alcohol be served?	Yes 🗆	No □	
Contact Person and Title:		Admission charge?			
		Are Tables Needed?			
Address:	ednis	Are Chairs Needed?	Yes □	No 🗆	
City:		Is additional equipment r	equested		
Home Number:		by applicant/club?	Yes □	No 🗆	
Work Number:	ga na a ka daa si <del>Taraa a</del> Wiyaan	If so, list equipment:	MU IN ART	<u> 1867 - 1881</u> 1867 - 1881	MARKAN PRODUKA
Fax Number:	EKNI POTTAGIA KAR <del>BOX 13 M</del> IRWITARI	TR <del>OLON AND AND AND AND AND</del>	190 65066 <del>24 381 40</del>	Allenii <del>Alleni</del> i	
g tventreughten in tringer bedreit g	STATEME	ENT OF LIABILITY			
express condition of this permit that the Permi	ttee agrees to, and			ollister an	

Date:\_

<ol> <li>Check Exhaust Vent</li> <li>Check oven off (heat &amp; blower)</li> <li>Check windows (closed &amp; locked)</li> <li>Discard garbage outside/bins</li> <li>Grease and other items are not to be thrown down the sinks</li> <li>Sweep and Mop Kitchen area</li> <li>If cooking, bring own cooking supplies.</li> </ol>			PROHIBITED ACTIVITIES	i
2. Rearranging furniture without authorization from facility monitor. 3. ONLY Bere &Wine. 4. No Glass Containers, ONLY Wine / Champagne bottles. 5. Consumption of alcoholic beverages in parking lot. 6. Drinking, smoking or eating in hallways. 7. Playing of any music after 10:00 PM 8. No Smoking allowed in the facility. 9. Absolutely NO CONFETTI 10. Absolutely NO CONFETTI 11. Absolutely NO CONFETTI 12. Absolutely NO TONETTI 13. If alcohol is served or allowed to be present at the facility or thought over event, at the discretion of the City, the City has the right to retain all or some of the deposit to cover the cost of enforcing this regulation. (initials) 12. If a Police Officer is dispatched during the scheduled time of event, the city shall have the right to retain all or some of the deposit to cover the cost of enforcing this regulation. (initials) 13. Expose the cost of enforcing the policies and procedures set forth by the City of Hollister. (initials) 14. CLEAN-UP RESPONSIBILITIES 15. All trash is to be placed in designated dumpster located outside building. 16. Clean and sanitize both chairs and tables thoroughly and returned to designated area. 17. Policing and removing litter from parking lot is required. 18. Remove all decorations and personal items brought by Permitee. 19. Driling area is to be swept and mopped and cleaning equipment is to be returned to designated area. 20. Policing and removing litter from parking lot is required. 21. Restrooms (swept and mopped) 22. Clean as Sanitize table, counter, and sinks 23. Clean stove & grill 24. Clean mats 25. Clean stove & grill 26. Check Exhaust Vent 27. Check oven off (heat & blower) 28. Check windows (closed & locked) 39. Discard garbage outside/bins 10. Grease and other items are not to be thrown down the sinks 11. Sweep and Mopp ok Kitchen area 12. If cooking, bring own cooking supplies.	THE F	OLI	LOWING ACTIVITIES ARE <u>PROHIBITED</u> IN THE HOLLISTER COMMUN	ITY CENTER:
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HAVING READ THE STATEMENT OF LIABILITY, PROHIBITED ACTIVITIES AND CLEAN UP RESPONSIBILITIES ON THE REVERSE SIDE OF THIS FORM AND UPON SUBMITTING THE ABOVE REQUEST FOR USE OF THE CITY OF HOLLISTER FACILITY, WE/I AGREE TO ABIDE BY AND ENFORCE ALL RULES AND REGULATIONS OF THE CITY OF HOLLISTER AND THE RECREATION DIVISION OF THE COMMUNITY SERVICES DEPARTMENT WHICH PERTAIN TO USE OF THE FACILITIES REQUESTED, AND TO BE RESPONSIBLE FOR ITS FACILITIES IN THE SAME CONDITION IN WHICH RECEIVED AND TO REIMBURSE THE CITY OF HOLLISTER THROUGH FORFEITURE OF DEPOSIT AND/OR ADDITIONAL REIMBURSEMENT FOR ANY LOSS OR DAMAGE.

NOTICE	ON INSURANCE PREMIUM
IN THE EVENT RENT	R CANCELS FACILITY RESERVATION,
INSURANCE CE	RTIFICATE IS NOT REFUNDABLE.
Sign:	Date: